

J1131 U.S. PTO  
01/11/02

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A/Reissue

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PTO/SB/50 (08-01)

Approved for use through 12/30/2000. OMB 0651-0003  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:  Commissioner for Patents Box Reissue Washington, DC 20231	Attorney Docket No.	125.028USR1
	First Named Inventor	Michael M. Walters, et al.
	Original Patent Number	6,278,263
	Original Patent Issue Date (Month/Day/Year)	08/21/01
	Express Mail Label No.	EL823841819US

**APPLICATION FOR REISSUE OF:**  Utility Patent  Design Patent  Plant Patent

**APPLICATION ELEMENTS (37 CFR 1.173)**

1.  Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2.  Applicant claims small entity status. See 37 CFR 1.27.
3.  Specification and Claims in double column copy of patent format (amended, if appropriate)
4.  Drawing(s) (proposed amendments, if appropriate)
5.  Reissue Oath/Declaration (original or copy)  
(37 CFR § 1.175)(PTO/SB/51 or 52)
6. Original U.S. Patent currently assigned?  
 Yes  No  
*(If Yes, check applicable box(es))*
- Written Consent of all Assignees (PTO/SB/53)
- 37 CFR 3.73(b)  
Statement (PTO/SB/96)  Power of Attorney

**ACCOMPANYING APPLICATION PARTS**

7.  Statement of status/support for all changes to the claims. See 37 CFR 1.173(c).
8.  Original U.S. Patent for surrender
  - Ribboned Original Patent Grant
  - Statement of Loss (PTO/SB/55)
9.  Foreign Priority Claim (35 U.S.C. 119) (if applicable)
10.  Information Disclosure Statement (IDS)/PTO-  
 Copies of IDS Citations
11.  English Translation of Reissue Oath/Declaration (if applicable)
12.  Preliminary Amendment
13.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
14. Other:

**15. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27073	or	<input checked="" type="checkbox"/> Correspondence address below		
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Signature	<i>Laura A. Ryan</i>			Date	January 11, 2002

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**REISSUE APPLICATION FEE TRANSMITTAL FORM**

Docket Number (optional)

125.028USR1

**Claims as Filed – Part 1**

Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	or	Rate	Fee
(A) 18	Total Claims (37 CFR 1.16(j))	(B) 22	**** 2 =	x \$	=	x \$	18 =	36.00
(C) 3	Independent claims (37 CFR 1.16(j))	(D) 5	* 3 =	x \$	=	x \$	84 =	168.00
Basic Fee (37 CFR 1.16(h))				\$			\$	740.00
Total Filing Fee				\$		OR	\$	944.00

**Claims as Amended – Part 2**

	(1) Claims Remaining After Amendment		(2) Highest No. Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$	=	x \$	=
Independent claims 37 CFR 1.16(j))	***	MINUS	*****	=	x \$	=	x \$	=
Total Additional Fee				\$			OR	\$

\* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

\*\* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

\*\*\* After any cancellation of claims.

\*\*\*\* If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).

\*\*\*\*\* "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

 Applicant claims small entity status. See 37 CFR 1.27. Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required,  
or credit any overpayment to Deposit Account No. 501373  
A duplicate copy of this sheet is enclosed. A check in the amount of \$ 944.00 to cover the filing/additional fee is enclosed. Payment by credit card Form PTO-2038 is attached.January 11, 2002

Date

Signature of Applicant, Attorney, or Agent of Record

Laura A. Ryan / Reg. No. 49,055

Typed or printed name